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| Fill in this information to identify your case: | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Ricky | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for example, your driver's | Middle name Wright Bobo | Middle name |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First name | First name |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX1770 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Ricky First Name | Wright Bobo Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years Include trade names and | Business name | Business name |
| doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 0004.01/1. D. A.1547 | If Debtor 2 lives at a different address: |
| | 2901 S King Dr, Apt 517 Number Street | Number Street |
| | Chicago Illinois 60616 City State Zip Code | City State Zip Code |
| | Cook County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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| Debtor 1 Ricky | | | Case number (if kno | own) |
|---|---|--|---|---|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Case | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descrip Bankruptcy (Form B2010)). Also Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details about how yo cashier's check, or money may pay with a credit card. I need to pay the fee in in Individuals to Pay Your Formula in the official poverty line the | ou may pay. Typically, if you order If your attorney is all or check with a pre-printenstallments. If you choose illing Fee in Installments (Commanded (You may request uired to, waive your fee, an at applies to your family siou must fill out the Applic | ou are paying the submitting you ed address. this option, sig official Form 103 this option only d may do so only ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. Have you filed for bankruptcy within the last 8 years? | Ves. District District District | WhenWhenWhen | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | No. Go to line 12 | Statement About an Eviction | | b you want to stay in your residence? St You (Form 101A) and file it with |

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Wright Bobo Debtor 1 Ricky Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? $\overline{\mathbf{v}}$ No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Ricky
 Wright Bobo
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Wright Bobo Debtor 1 Ricky Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Ricky Wright Bobo Signature of Debtor 1 Signature of Debtor 2 Executed on _ 9/26/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Ricky | | Wright Bobo | Case number | (if known) |
|--|----------------------------|-----------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, Uni | I have informed the debtor(s) about ted States Code, and have explained the I also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in | n which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the | information in the sch | edules filed with the petition is incorrect. |
| attorney, you do not | | | | · |
| need to file this page. | /s/ Elizabeth Placek | | Date | 9/26/2017 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | , | | | |
| | | | | |
| | Elizabeth Placek | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | | | | |
| | 20 S. Clark Street Street | | | |
| | | | | |
| | 28th Floor | | | |
| | Chicago | | Illinois | 60603 |
| | Chicago City | | State | Zip Code |
| | Oity | | Oldic | Zip oode |
| | Contact phone | 3124477838 | Email address | eplacek@semradlaw.com |
| | | | Illin | ois |
| | Bar number | | Stat | re . |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|----------------------|--|
| Debtor 1 | Ricky | | Wright Bobo | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | 40.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,427.50 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,427.50 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$9,628.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$24,351.00 |
| Your total liabilities | \$33,979.00 |
| Part 3: Summarize Your Income and Expenses | |
| I. Schedule I: Your Income (Official Form 106I) | |
| . Contradic I. Tour moome (Chician Com 1001) | \$1,676.85 |
| Copy your combined monthly income from line 12 of Schedule I | |
| · · · · · · · · · · · · · · · · · · · | \$1,226.00 |

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| Deb | otor 1 Ricky | | Wright Bobo | Case number (if known) | |
|-------------|---|---|---|---|------------|
| Part | First Name 4: Answer These Ques | Middle Name stions for Administrativ | Last Name ve and Statistical Record | ds | |
| [| No. You have nothing to | | | this form to the court with your other sch | nedules. |
| 7. v | family, or household purp | consumer debts. Consumose. 11 U.S.C. § 101(8). Filarily consumer debts. You | Il out lines 8-10 for statistical p | v an individual primarily for a personal, urposes. 28 U.S.C. § 159. s part of the form. Check this box and su | bmit |
| | From the Statement of You. Form 122A-1 Line 11; OR , Fo | | : Copy your total current mont m 122C-1 Line 14. | thly income from Official | \$1,676.86 |
| 9. | Copy the following special | categories of claims from | n Part 4, line 6 of Schedule | E/F: | |
| | From Part 4 on Schedule I | E/F, copy the following: | | Total claim | |
| | 9a. Domestic support obliga | tions (Copy line 6a.) | | \$0.00 | |
| | 9b. Taxes and certain other | debts you owe the governm | nent. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for death or person | onal injury while you were in | toxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. Student loans. (Copy line | e 6f.) | | \$19,199.00 | |
| | 9e. Obligations arising out o priority claims. (Copy line 6g | | divorce that you did not repor | t as \$0.00 | |
| | 9f. Debts to pension or profi | t-sharing plans, and other s | similar debts. (Copy line 6h.) | \$0.00 | |

\$19,199.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to identify you | case: | | | |
|--|--|--|--|--|--|
| | | | Willia | | |
| Debtor 1 | Ricky First Name | Middle N | Wright Bobo ame Last Name | | |
| Debtor 2 | i not raine | Wildle N | Lastivanie | | |
| (Spouse, if fil | ing) First Name | Middle N | ame Last Name | | |
| United Sta | ites Bankruptcy Court for the | e: Northern | District of Illinois (State) | | |
| Case num (If known) | ber | | (State) | | |
| Officia | I Form 106A/B | | | _ | Check if this is an amended filing |
| Sched | dule A/B: Prop | erty | | | 12/1 |
| category w responsibl write your | where you think it fits best e for supplying correct int name and case number (i | t. Be as complete ar formation. If more sp f known). Answer ev | st an asset only once. If an asset fits in n ad accurate as possible. If two married p pace is needed, attach a separate sheet very question. ad, or Other Real Estate You Own o | people are filing together, both a to this form. On the top of any a | re equally |
| | | | | | |
| | | equitable interest in | n any residence, building, land, or simila | r property? | |
| ✓ | No. Go to Part 2 | | | | |
| | Yes. Where is the property? | • | | | |
| | | | What is the property? Check all that appl | | claims or exemptions. Put |
| 1.1 | Street address, if available, | or other description | Single-family home | | red claims on Schedule D: ims Secured by Property. |
| | onost address, ii available, | or ourse accompliant | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative | entire property? | portion you own? |
| | | | Manufactured or mobile home | | |
| | Number Street | | Land | Describe the nature o | f vour ownership |
| | | | Investment property | interest (such as fee s | |
| | City State | Zip Code | Timeshare Other | the entireties, or a life | e estate), if known. |
| | , | p | Who has an interest in the property? Cl | Check if this is co | mmunity property |
| | | | one. | | |
| | | | Debtor 1 only | | |
| | | | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and anothe | er | |
| | | | Other information you wish to add abou | ut this item, such as local | |
| If you | own or have more than one | list hara: | property identification number: | | |
| ii you | own of have more than one | , list fiele. | What is the property? Check all that appl | lv. Do not deduct secured | claims or exemptions. Put |
| 1.2 | | | Single-family home | the amount of any secu | red claims on Schedule D: |
| | Street address, if available, | or other description | Duplex or multi-unit building | Creditors Who Have Cla | ims Secured by Property. |
| | | | Condominium or cooperative | Current value of the | Current value of the |
| | | | Manufactured or mobile home | entire property? | portion you own? |
| | | | Land | | |
| | Number Street | | Investment property | Describe the nature o interest (such as fee s | |
| | | | Timeshare | the entireties, or a life | |
| | City State | Zip Code | Other | | |
| | | | Who has an interest in the property? Clone. | | mmunity property |
| | | | Debtor 1 only | Ш | |
| | | | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and anothe | er | |
| | | | | | |
| | | | Other information you wish to add about property identification number: | ut tino item, such do lucal | |

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| Debtor 1 | | | Wright Bobo | Case numbe | r (if known) | |
|--------------------------------|--|--|---|----------------|---|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 | et address, if available, or oth | [| What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative | pply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nun City | nber Street State | Zip Code | Manufactured or mobile home Land Investment property Timeshare Other | | Describe the nature o interest (such as fee s the entireties, or a life | f your ownership imple, tenancy by |
| | | [[[] | Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anotle Other information you wish to add aboroperty identification number: | ner | (see instructions) | mmunity property |
| | the dollar value of the por ve attached for Part 1. Wr | tion you own for a | all of your entries from Part 1, includ | ing any entrie | s for pages | |
| Do you ow you own th | | equitable interest ou lease a vehicle, | t in any vehicles, whether they are re also report it on Schedule G: Executory cycles | - | - | |
| ☐ No | | | | | | |
| ✓ Yes | 3 | | | | | |
| 3.1 | Make Model: Year: | Nissan Altima S 2011 | Who has an interest in the prope one. Debtor 1 only | rty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2011 Nissan Altima S | 180000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and | another | Current value of the entire property? \$3315.00 | Current value of the portion you own? \$1657.50 |
| | | | Check if this is community prinstructions) | operty (see | | |
| 3.2 | Make Model: Year: | | Who has an interest in the prope one. Debtor 1 only | rty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and | | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community prinstructions) | operty (See | | |

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| otor i | Ricky First Name | Middle Name | Wright Bobo Last Name | Case number | el (II Kriowri) | |
|--------|--|-------------|--|---|--|---|
| 3.3 | Make Model: Year: Approximate mileage: | | Who has an interest in the pone. Debtor 1 only | roperty? Check | the amount of any secu | claims or exemptions. Princed claims on Schedule nims Secured by Property |
| | | | Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 only | | | |
| | | | At least one of the debtors | | | |
| | | | Check if this is communi instructions) | ty property (see | | |
| 3.4 | Make | | Who has an interest in the p | roperty? Check | | claims or exemptions. P |
| | Model: Year: | | one. | | | red claims on <i>Schedule</i> nims Secured by Property |
| | Approximate mileage: | - | Debtor 1 only | | | |
| | | | Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property: | portion you own: |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi instructions) | ty property (see | | |
| Exar | | • | er recreational vehicles, other v t, fishing vessels, snowmobiles, m | • | | |
| Exar | nples: Boats, trailers, motors No Yes Make | • | t, fishing vessels, snowmobiles, m Who has an interest in the p | otorcycle accessori | Do not deduct secured | claims or exemptions. Priced claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes | • | t, fishing vessels, snowmobiles, m | otorcycle accessori | Do not deduct secured the amount of any secu | red claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, m Who has an interest in the p one. | otorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Property |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, m Who has an interest in the p one. Debtor 1 only | otorcycle accessori | Do not deduct secured the amount of any secu | red claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only | otorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only | otorcycle accessori roperty? Check y and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the p | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P hered claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Creditors Control of the secured the amount of any secu Creditors Who Have Clate Control of the secured the secur | red claims on Schedule lims Secured by Property Current value of the portion you own? claims or exemptions. P lired claims on Schedule lims Secured by Property |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | roperty? Check y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Creditors Control of the secured the amount of any secu Creditors Who Have Clate Control of the secured the secur | red claims on Schedule lims Secured by Property Current value of the portion you own? claims or exemptions. P limed claims on Schedule lims Secured by Property |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | roperty? Check y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |

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Case number (if known) Debtor 1 Ricky Wright Bobo Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Electronics - 1 Cell Phone \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc Jewelry \$30.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$630.00 for Part 3. Write that number here

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Debtor 1 Ricky Wright Bobo Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Go Bank - Prepaid Debit \$140.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Ricky | | Wright Bobo | Case number (if known) | |
|------|--|---|-------------------------------|---|---|
| | First Name | Middle Name | Last Name | | _ |
| 20. | Negotiable instruments | orate bonds and other negotiab include personal checks, cashiers' ents are those you cannot transfer Issuer name: | checks, promissory notes | , and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in If | RA, ERISA, Keogh, 401(k), 403(b) | | r other pension or profit-sharing plans | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for a | number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debto | or 1 Ricky | | Wright Bobo | Case number (if known) | |
|-------|--|---|--|---|---|
| | First Name | Middle Name | Last Name | | |
| 24. | | n education IRA, in an account in a q 30(b)(1), 529A(b), and 529(b)(1). | ualified ABLE program, or un | der a qualified state tuition program. | |
| | ✓ No Yes | Institution name and description. Separa | ately file the records of any interest | ests.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | | ble or future interests in property (ot r your benefit | her than anything listed in lir | ne 1), and rights or powers | |
| | ✓ No Yes. Descri | ibe | | | |
| 26. | | rights, trademarks, trade secrets, an | | | |
| | No No | rnet domain names, websites, proceeds | from royalties and licensing agi | reements | |
| | Yes. Descri | ibe | | | |
| 27. | | achises, and other general intangibles ding permits, exclusive licenses, coopera | | r licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Desci | ibe | | | |
| | _ | | | | |
| Mon | ey or proper | ty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or proper Tax refunds ov | | | | portion you own? Do not deduct secured |
| | Tax refunds ov | | | | portion you own? Do not deduct secured |
| | Tax refunds ov No Yes. Give s | ved to you pecific information | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds ov ✓ No Yes. Give s about you a | pecific information them, including whether lready filed the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov ✓ No Yes. Give s about you a and th | pecific information them, including whether lready filed the returns ne tax years | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: Local: e, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: Local: e, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s | pecific information them, including whether lready filed the returns ne tax years | port, child support, maintenanc | State: Local: e, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns ne tax years | , disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns ne tax years | , disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns ne tax years | , disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb ⁻ | tor 1 Ricky | Wright Bobo | Case number (if known) | |
|------------------|--|---|---|--|
| | First Name Midd | Ile Name Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurar | nce; health savings account (HSA); credit, hom | neowner's, or renter's insurance | |
| | No Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due yo If you are the beneficiary of a living trust, property because someone has died. No | u from someone who has died expect proceeds from a life insurance policy, o | or are currently entitled to receive | |
| | Yes. Describe | | | |
| 33. | Claims against third parties, whether Examples: Accidents, employment disput | or not you have filed a lawsuit or made a des, insurance claims, or rights to sue | demand for payment | |
| | Yes. Describe | | | |
| 34. | Other contingent and unliquidated cla to set off claims | aims of every nature, including countercla | ims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not alread | dy list | | |
| | ✓ No Yes. Describe | | | |
| 36. | | ies from Part 4, including any entries for p | | \$140.00 |
| Part | 5: Describe Any Business-Relate | ed Property You Own or Have an Inte | erest In. List any real estate in Part | 1. |
| 37. | Do you own or have any legal or equita | able interest in any business-related prop | erty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | po Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions y | you already earned | | |
| | ✓ No Yes. Describe | | | |
| 39. | Office equipment, furnishings, and sup Examples: Business-related computers, s | oplies oftware, modems, printers, copiers, fax mach | ines, rugs, telephones, desks, chairs, electr | onic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Ricky | Wright Bobo | Case number (if known) | |
|----------|--------------------------------|---|----------------------------|---|
| 40 | First Name | Middle Name Last Name | | |
| 40. | | ipment, supplies you use in business, and tools of your trade | , | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41. | Inventory | | | |
| | - N | | | |
| | No No Deceribe | | | |
| | Yes. Describe | | | |
| | | | | |
| 42. | Interests in partnerships | s or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | |
| | | - | | |
| | | - <u></u> | | |
| 43. | Customer lists, mailing lis | sts, or other compilations | | |
| | ✓ No | | | |
| | | lude personally identifiable information (as defined in 11 U.S.C. § | 101(41A))? | |
| | | | | |
| | No No | _ | | |
| | Yes. Describ | a | | |
| 44. | Any business-related pr | operty you did not already list | | |
| | — | | | |
| | | | | |
| | Yes. Give specific information | | | |
| | | | | _ |
| | | | | - |
| | | | | |
| | | | | |
| | | | | _ |
| | | | | |
| | | | | |
| | | of your entries from Part 5, including any entries for pages you | | |
| <u> </u> | | | | |
| Part | 6: Describe Any Far | m- and Commercial Fishing-Related Property You O | wn or Have an Interest In. | |
| | if you own or nave an in | terest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any | legal or equitable interest in any farm- or commercial fishin | g-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | the face wind fal | | |
| | Examples: Livestock, pou | itry, tartti-raised tish | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debt | tor 1 Ricky First Name | | right Bobo | Case number (if known) | |
|--------------|----------------------------|--|--------------------------|--------------------------------|-------------|
| 48. | | | | | |
| | ✓ No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | L | | | | |
| 51. | | rcial fishing-related property you did n | ot already list | | |
| | ✓ No Yes. Describe | | | | |
| | Too. Boosilbo | | | | |
| 52. A | dd the dollar value of al | II of your entries from Part 6, including | any entries for pages yo | u have attached | |
| | | r here | | | |
| | | | | | |
| | | | | | |
| Part 1 | | perty You Own or Have an Intere | | List Above | |
| 53. | | perty of any kind you did not already liss s, country club membership | st? | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | ll of your entries from Part 7. Write tha | t number here | | • |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of | f Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | e, line 2 | | ····· | |
| 56. r | oart 2 total vehicles, lin | e 5 | \$1657.50 | | |
| 57. P | art 3: Total personal an | nd household items, line 15 | \$630.00 | | |
| 58. P | art 4: Total financial as | ssets, line 36 | \$140.00 | | |
| 59. F | Part 5: Total business-re | elated property, line 45 | | | |
| 60. F | Part 6: Total farm- and f | fishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62.1 | Total personal property. | . Add lines 56 through 61 | \$2427.50 | Copy personal and a state ! | + \$2427.50 |
| | | | | Copy personal property total ▶ | |
| 63. T | otal of all property on S | Schedule A/B. Add line 55 + line 62 | | | \$2427.50 |
| | | | | | Í. |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|---|--|
| Debtor 1 | Ricky | | Wright Bobo | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | - | |
| Case number (If known) | | | (Glato) | _ | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | Part 1: Identify the Property You Claim as Exempt | | | | | |
|-----|---|---|---|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Nissan Altima S, 2011, 2011 Nissan Altima S Line from Schedule A/B: 03 | \$1,657.50 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | |
| | Brief description: Used Clothing Line from Schedule A/B: 11 | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | |
| 3. | ✓ No | y 3 years after that for o | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | |

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Wright Bobo Debtor 1 Ricky Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$200.00 description: **✓** \$200.00 **Used Electronics - 1 Cell** 100% of fair market value, up to any Phone applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$30.00 description: **✓** \$30.00 Misc Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(b) Brief \$140.00 description: \$140.00 Checking account, Go 100% of fair market value, up to any Bank - Prepaid Debit applicable statutory limit Line from

Schedule A/B:

17

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| | | Con | ected PDF Page 22 0 | 11 12 | | |
|---------------------------------|---|--|---|---|---|-----------------------------------|
| Fill in this infor | rmation to identify your ca | ase: | | | | |
| Debtor 1 | Ricky | | Wright Bobo | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number | | | (State) | | | |
| Official | Form 106D | | | | | Check if this is a |
| | | ore Who Ha | ve Claims Secure | ad by Prop | | 3 |
| | | | e are filing together, both are equ | | | 12/1 |
| 1. Do any o | e number (if known). creditors have claims so Check this box and subn Fill in all of the information All Secured Claims | nit this form to the court | ty? with your other schedules. You hav | re nothing else to repo | ort on this form. | |
| 2. List all separate | secured claims. If a creditely for each claim. If more the | han one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 TTL FIN | _ | Describe the property | that secures the claim: | \$9,628.00 | \$3,315.00 | \$6,313.00 |
| Chicag City Who ov Det Det Det | s Archer Ave per Street | Nissan Altima S Value: As of the date you file Contingent Unliquidated Disputed Nature of lien. Check An agreement you car loan) | \$3,315.00 a, the claim is: Check all that apply. all that apply. made (such as mortgage or secured as tax lien, mechanic's lien) n a lawsuit | | | |
| L to | a community debt ebt was <u>7/2016</u> | Last 4 digits of accou | | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$9,628.00

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| Fill | in this inforr | mation to identify your c | ase: | | | | | |
|--|---|--|---|--|--|--|--|--|
| Deb | otor 1 | Ricky | | Wright Bobo | | | | |
| D-1- | | First Name | Middle Name | Last Name | | | | |
| | otor 2 use, if filing) | First Name | Middle Name | Last Name | | | | |
| | | | | | | | | |
| Unit | ted States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Cas | e number | | | (State) | | | | |
| (If kn | own) | | | | | | | |
| Off | ficial F | orm 106E/F | | | | Che | eck if this is an | n amended filing |
| | | | 11. 34/1 | | | | | |
| 50 | chedi | lie E/F: Cre | editors who | Have Unse | cured Claims | | | 12/15 |
| othe Form clain the e knov | r party to a n 106A/B) a ns that are entries in th vn). | any executory contracts and on <i>Schedule G: Exe</i> listed in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims | t could result in a claim expired Leases (Official s Secured by Property. | ns and Part 2 for creditors wit Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v | on <i>Schede</i> ny creditor the Part yo | ule A/B: Prop rs with partia ou need, fill i | perty (Official ally secured t out, number |
| 1. | - | reditors have priority un Go to Part 2. | secured claims against y | ou? | | | | |
| 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit | ty and nonpriority amoun ding to the creditor's nam particular claim, list the o | | both priority | and nonprio | rity amounts. |
| | | | | | | Total | Priority | Nonpriority |

claim

amount

amount

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Debtor 1 Ricky Wright Bobo Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** City of Chicago - Parking and red Light Tickets 4.1 \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Tickets Is the claim subject to offset? Yes FIFTH THIRD 4.2 \$175.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 630784 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 45263 Ohio Cincinnati City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt NSF Fees Other. Specify ____ Is the claim subject to offset? **✓** No Yes I C SYSTEM INC 4.3 \$902.00 Last 4 digits of account number 2169 Nonpriority Creditor's Name When was the debt incurred? 6/2017 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: ATT **✓** No Other. Specify MOBILITY Yes

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Debtor 1 Ricky First Name Case number (if known) Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth

| | Arter fishing any entries on this page, number them beginning with | 1 4.5, lollowed by 4.0, and 30 loltil. | Total Claim |
|-----|--|---|-------------|
| 4.4 | IL Tollway Nonpriority Creditor's Name | Last 4 digits of account number | \$800.00 |
| | 2700 Ogden Ave Number Street | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Downers Grove Illinois 60515 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Toll Violations | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.5 | Mercy Hospital | Loct 4 digits of account number | \$275.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number When was the debt incurred? n/a | |
| | 2525 S. Michigan Avenue Number Street | when was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60616 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts Other. Specify Medical | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | U S DEPT OF ED/GSL/ATL | Last 4 digits of account number 3995 | \$5,628.00 |
| | Nonpriority Creditor's Name PO BOX 2287 | When was the debt incurred? 3/2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | ATLANTA Georgia 30301 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ✓ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | No | | |

Yes

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Debtor 1 Ricky Right Bobo Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | n Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning wi | ith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | U S DEPT OF ED/GSL/ATL Nonpriority Creditor's Name PO BOX 2287 Number Street | Last 4 digits of account number 4106 When was the debt incurred? 11/2011 As of the date you file, the claim is: Check all that apply. | \$4,089.00 |
| | ATLANTA Georgia 30301 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| 4.8 | U S DEPT OF ED/GSL/ATL Nonpriority Creditor's Name PO BOX 2287 Number Street ATLANTA Georgia 30301 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Last 4 digits of account number 4118 When was the debt incurred? 3/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$2,995.00 |
| 4.9 | US DEPT OF ED/GSL/ATL Nonpriority Creditor's Name PO BOX 2287 Number Street ATLANTA Georgia 30301 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number 4003 When was the debt incurred? 11/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$2,848.00 |

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Wright Bobo Debtor 1 Ricky Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** U S DEPT OF ED/GSL/ATL 4.10 \$2,140.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 3/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30301 **ATLANTA** Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 U S DEPT OF ED/GSL/ATL \$1,499.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 3/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Ricky Wright Bobo Case number (if known)

| First Na | me Middle Name Last Name | | |
|--------------------------|---|---------|--------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| 6. Total the a | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$19,199.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | . \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$5,152.00 |
| | 6j. Total. Add lines 6f through 6i. | 6i. | \$24,351.00 |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Ricky | | Wright Bobo | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Otato) | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | Cori | ected PDF Pa | je 30 of 72 | |
|-----------|---------------------------------|--|--|---|--|------------------------------------|
| Fill in t | this infor | mation to identify your c | ase: | | | |
| Debto | r 1 | Ricky | | Wright Bobo | | |
| Debto | r 0 | First Name | Middle Name | Last Name | | |
| | e, if filing) | First Name | Middle Name | Last Name | | |
| United | States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | number | | | (State) | | |
| Offi | | Form 106H | | | | Check if this is an amended filing |
| Sch | edul | e H: Your Cod | lebtors | | | 12/15 |
| | Do you No Ye Within t Californi | the every question. thave any codebtors? (If o) es the last 8 years, have you a, Idaho, Louisiana, Nevalo b. Go to line 3. es. Did your spouse, form | you are filing a joint case, u lived in a community p da, New Mexico, Puerto Ri ner spouse, or legal equi | do not list either spouse a property state or territor co, Texas, Washington, a valent live with you at the | ? (Community property states and territodd Wisconsin.) | <i>vries</i> include Arizona, |
| | | | ormer spouse, or legal equ | | | or that poison. |
| | | Number Street | | | | |
| | | City | State | Zip Co | e | |
| 3. | again a | s a codebtor only if that | person is a guarantor o | r cosigner. Make sure y | if your spouse is filing with you. List to the distention of the creditor on Schedule the dule D, Schedule E/F, or Schedule of the distance of | D (Official Form 106D), |
| | Column | 1: Your codebtor | | | Column 2: The creditor to who | m you owe the debt |
| | | | | | Check all schedules that apply: | |

Schedule D, line 2.1

Schedule E/F, line_____

Schedule G, line

✓

60616

Zip Code

3.1 Wright, Alicia

Name

Number

Chicago City

2901 S King Drive, Apt 517

Illinois State

Street

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| Debtor 1 Ricky First Name Middle Name Last Name Dabtor 2 Recesse, if simple First Name Middle Name Last Name United States Bankruptcy Court for Northern District of Minos the: Class number (State) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling logisthy, and your spouse is filling with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach seasonal, or asset-employed wink. Occupation may include student or homemister, if it appless. Part 2: Give Details About Monthly Income Employer's address Debtor 1 Debtor 2 Employer's address Divisor Employer's address Divisor State Debtor 1 Debtor 2 Debtor 3 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 3 Debtor 4 Debtor 2 Debtor | Fill i | n this inf | ormation to identify | your case: | | | | | |
|--|--------------|--|--|--|------------------------|--------------------------------------|-------------------------------|--|-----------------------------------|
| Debtor 2 Check if this is | Dobi | ou 1 | Dielor | | \ \ /v: albt | Daha | | | |
| Debtor 2 Spouse, if fines First Name Middle Name Last Name Last Name A supplement showing post-petition chapter 13 to personal page with the complete standard post of the complete standard post post post of the complete standard post post post of the complete standard post post post post post post post post | Debi | Or I | | Middle Name | | | - | | |
| Middle Name Last Name N | Debt | or 2 | THOC HAINS | madio Harrio | Laotit | arro | Che | eck if this is: | |
| Case number Solution Solutio | | | First Name | Middle Name | Last N | ame | - | An amended filing | |
| Case number (State) Official Form 106l Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouses. If you are separated and your spouse is not filing with you, do not include information about your spouses. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment If you have more than one pb, attach a separate page with information about additional employers. If you have more than one pb, attach a separate page with information about additional employers. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Occupation may include student or homemaker, if it applies. Employer's address Number Streat Number Streat Number Streat Number Streat Number Streat Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write S0 in the space. Include your non-filing spouse unless you are separated. The power is non-filing spouse lines below. If you need more epace, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +80.00 | Linite | d States | Rankruptov Court for | Northern | District of Illi | nois | | | |
| Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing bild to, do not include information about your spouse. If wor are separated and your spouse is filing with you, do not include information about your spouse is not filing with you, do not include promation about your spouse is letter filing with you, do not include promation about your spouse is in filing with you, do not include promation and your spouse is not filing with you, do not include mortantion and your spouse is not filing with you, do not include mortantion and your spouse is not filing with you, do not include mortantion. Part 1: Describe Employment 1. Fill in your employment If you have more than one pib, altach a separate page with information about additional employers. Occupation Employer a name Employer's address Occupation Diver Down Employer's address Occupation include part time, seasonal, or self-amployed work. Occupation may include student or homemaker, if it apples. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse deductions,) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +80.00 | | o otatos | Darini aptoy Godi tiloi | 140/11/07/11 | _ | | - - (| expenses as of the follo | wing date: |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Four tile Describe Employment | | | | | ` | , | _ . | | |
| Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional pages, write your name and case number (If when the possible of the property o | (If Kno | own) | | | | | | MM / DD / YYYY | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employer's name Employer's address Debtor 2 Employer's name Employer's address Delver Employer's proved Employer's address 2300 Harrison St. Number Street Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. I for Debtor 1 For Debtor 1 For Debtor 2 For Debtor 3 For Debtor 2 For Debtor 3 For Debtor 3 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 6 For Debtor 9 | Off | icial | Form 106I | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employer's name Employer's address Debtor 2 Employer's name Employer's address Delver Employer's proved Employer's address 2300 Harrison St. Number Street Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. I for Debtor 1 For Debtor 1 For Debtor 2 For Debtor 3 For Debtor 2 For Debtor 3 For Debtor 3 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 6 For Debtor 9 | | | | come | | | | | 10/15 |
| responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employed. Occupation Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 2300 Harrison St. Number Street Number Street Number Street Number Street Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 9 For Debtor 9 | | icaa | C I. I Oui III | COITIC | | | | | 12/13 |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Cocupation Employer's name Employer's address Cocupation nay include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Litt monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | responsor | onsible f mation a se. If mo per (if kr | or supplying correct bout your spouse. I bre space is needed down). Answer ever | t information. If you are f you are separated and , attach a separate she y question. | married and your spous | d not filing joi se is not filing | ntly, and you with you, do | r spouse is living wit not include informat | h you, include tion about your |
| information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | 4 . | T:II ::: | | | Debtor 1 | | | Debtor 2 | |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | - | | | | | | | |
| attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3 | | f you have | more than one job | Employment status | ✓ Emplo | yed | | Employed | |
| Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Lyft 2300 Harrison St Number Street | | - | • | | Not Er | nployed | | Not Employed | |
| Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Employer's address Employer's address Employer's address Employer's address San California 94110 Francisco City State Zip Code City State Zip Code City State Zip Code Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | D./ | | | | |
| Employer's address Employer's address Employer's address Employer's address Employer's address Employer's address San California 94110 Francisco City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 Entimate monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | employers | | Occupation | Driver | | | _ | |
| Occupation may include student or homemaker, if it applies. San | | | | Employer's name | Lyft | | | _ | |
| or homemaker, if it applies. San California 94110 Gity State Zip Code | | • | • | Employer's address | 2300 Harri | son St | | | |
| San California 94110 Francisco City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | | • | | Number Str | eet | | Number Street | |
| How long employed there? Francisco City State Zip Code City State Zip Code | | | , | | | | | _ | |
| How long employed there? Francisco City State Zip Code City State Zip Code | | | | | | | | | |
| How long employed there? Francisco City State Zip Code City State Zip Code | | | | | Con | California | 04110 | | |
| How long employed there? City State Zip Code Code City State Zip Code C | | | | | | California | 94110 | City | State Zip Code |
| Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | City | State | Zip Code | | · |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | | | | | |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. \$1,135.42 deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | there: | | | | | • |
| spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | Par | t 2: Giv | e Details About N | onthly Income | | | | | |
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. non-filing spouse 1. \$1,135.42 | spc If yo | ouse unles ou or your | s you are separated. non-filing spouse have | e more than one employer, | - | information for a | ll employers fo | or that person on the line | |
| deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | | | | non-filing spouse | |
| | 2. | deductio | | | | 2. | \$1,135.42 | | _ |
| 4. Calculate gross income. Add line 2 + line 3. 4. \$1,135.42 | 3. | Estimat | e and list monthly over | time pay. | | 3. | + \$0.00 | | <u> </u> |
| | 4. | Calcula | te gross income. Add li | ne 2 + line 3. | | 4. | \$1,135.42 | | |

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| Debtor 1Ricky | Wright Bobo | Case number | (if | |
|---|------------------------|------------------------|-------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or | |
| Conviling 4 hours | → 4. | \$1,135.42 | non-filing spouse | |
| Copy line 4 here | - | Ψ1,100.42 | | |
| 5. List all payroll deductions: | 50 | 00.00 | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a | \$0.00 | | |
| 5b. Mandatory contributions for retirement plans | 5b | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d | \$0.00 | | |
| 5e. Insurance | 5e | \$0.00 | | |
| 5f. Domestic support obligations | 5f | \$0.00 | | |
| 5g. Union dues | 5g | \$0.00 | | |
| 5h. Other deductions. Specify: | | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5h$. | 5f + 5g 6 | \$0.00 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | e 4. 7 | \$1,135.42 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and | d | | | |
| the total monthly net income. | 8a | \$0.00 | | |
| 8b. Interest and dividends | 8b | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, or dependent regularly receive | ra | | | |
| Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement. | e, 8c | \$0.00 | | |
| 8d. Unemployment compensation | 8d | \$0.00 | | |
| 8e. Social Security | 8e | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | | \$0.00 | | |
| On Bandian as satisfactors at income | 8f | \$0.00 | | |
| 8g. Pension or retirement income | 8g | \$0.00 | | |
| 8h. Other monthly income. Specify: See attached | 8h. + _ | \$541.43 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9. <u> </u> | \$541.43 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling s | 10 | \$1,676.85 + | = | \$1,676.85 |
| 11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or and | r household, your de | pendents, your roomm | | |
| Specify: | Junto that ale not ave | made to pay expenses i | 11. + | - \$0.00 |
| opcony. | | | | φσ.σσ |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical St | | | | \$1,676.85 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after | you file this form? | | | |
| ✓ No. | | | | |
| Yes. Explain: | | | | |
| LI 100. Explain. | | | | |
| | | | | |

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Debtor 1 Ricky Wright Bobo Case number (if known)

Part 2: Give Details About Monthly Income

Official Form 106l. Additional page.

For Debtor 1 For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

1. Uber \$541.43

Official Form 106l Schedule I: Your Income page 3

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| | | Correc | ted PDF Page 34 of | 72 | |
|------------------------------------|----------------------------------|--|---|-------------------|---|
| Fill in this infor | mation to identify y | our case: | | | |
| Debtor 1 | Ricky First Name | Middle Name | Wright Bobo | | |
| Debtor 2 | | Wild die Warrie | Last Namo | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | |
| | Bankruptcy Court for | the: Northern | District of Illinois (State) | | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | _ | MM / DD / YYYY | / |
| Official | Form 106 | J | | | |
| Schedul | e J: Your E | xpenses | | | 12/15 |
| information. If | | ded, attach another sheet to this | re filing together, both are equal form. On the top of any addition | | |
| Part 1: Des | cribe Your Hous | ehold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. D | oes Debtor 2 live ir | n a separate household? | | | |
| | ■ No | | | | |
| | Yes. Debtor 2 mu | ust file Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Deb | tor 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| expenses o | penses include f people other | No | | | |
| than yourself and dependents | - | Yes | | | |
| Part 2: Esti | mate Your Ongo | ing Monthly Expenses | | | |
| _ | of a date after the l | | you are using this form as a suppl plemental Schedule J, check the | • | - |
| | | non-cash government assistance ded it on Sc <i>hedule I: Your Incom</i> e | | | Your expenses |
| | I or home ownershi | | nclude first mortgage payments and | | \$0.00 |
| If not incl | uded in line 4: | | | | |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Ricky Wright Bobo Case number (if known)
First Name Middle Name Last Name

| 5. Additional mortgage payments for your residence, such as home equily loans 5. \$0.00 6. Utilities: 5. \$0.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Talephone, call phone, Internet, satellite, and cable services 6c. \$120.00 6d. Other, Speatity: 6d \$0.00 7. Food and housekeeping supplies 7. \$400.00 8. Childrage and children's education costs 8. \$0.00 9. Clothing, Jaurdy, and dry cleaning 9. \$985.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 12. Transportation, Include gaz payments 12. \$400.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Internamence. \$0.00 \$0.00 15. White insurance 15a \$0.00 15. White insurance 15a \$0.00 15. White insurance Specify: 15d \$0.00 | First Name Middle Name | Last Name | | |
|---|---|--|-----|---------------|
| Sea | | | | Your expenses |
| 6a. Electricity, heat, natural gas 6a. \$0.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$120,00 6d. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 7. \$400,00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$95,00 10. Personal care products and services 11. \$26,00 11. Medical and dental expenses 11. \$26,00 11. Medical and dental expenses 11. \$26,00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$400,00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Install insurance 15. \$0.00 15b. Health insurance 15. \$0.00 15c. Vahicle Insurance 15c. \$150 15c. Vahicle Insurance 15c. \$150 15c. Vahicle Insurance | 5. Additional mortgage payments for your residence | e, such as home equity loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, call phone, Internet, satellite, and cable services 6c. \$120.00 6d. Other. Specify: 7. \$400.00 7. Food and housekeeping supplies 7. \$400.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$395.00 10. Personal care products and services 10. \$45.00 11. Medical and dental expenses 11. \$256.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$400.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in l | 6. Utilities: | | | |
| 6c. Telaphone, cell phone, linternet, satellite, and cable services 6d. S120.00 6d. Other. Specify: 6d. Other. Specify: 7. Food and housekeeping supplies 8. \$0.00 7. Food and housekeeping supplies 8. \$90.00 9. Clothing, laundry, and dry cleaning 9. \$95.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 12. \$400.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 15. Life insurance 15. Let insurance 16. S0.00 17. Let insurance 1 | 6a. Electricity, heat, natural gas | | 6a. | \$0.00 |
| 6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$400.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$55.00 10. Personal care products and services 10. \$45.00 11. Medical and dental expenses 11. \$26.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$400.00 Do not include care payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15 \$0.00 15a. Lile insurance deducted from your pay or included in lines 4 or 20. 15a. Lile insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 \$0.00 15c. Vehicle insurance. Specify: 15c \$140.00 15c. Vehicle insurance. 15c \$140.00 15c. Vehicle insurance. Specify: 16 \$0.00 17. Installment or lease payments: < | 6b. Water, sewer, garbage collection | | 6b. | \$0.00 |
| 7. Food and housekeeping supplies 7. \$400.00 8. Childcare and childcare's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$55.00 10. Personal care products and services 10. \$45.00 11. Medical and dental expenses 11. \$25.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$400.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 156 \$0.00 Do not include insurance ededucted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15a \$0.00 \$0.00 \$15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 < | 6c. Telephone, cell phone, Internet, satellite, and cab | le services | 6c. | \$120.00 |
| 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$95.00 10. Personal care products and services 11. \$26.00 11. Medical and dental expenses 11. \$26.00 11. Medical and dental expenses 11. \$26.00 11. Medical and dental expenses 11. \$26.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Too to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon the insurance. Specify: 16 17c. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 19. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. 19. \$0.00 20. Charles property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance | 6d. Other. Specify: | | 6d | \$0.00 |
| 9. Clothing, laundry, and dry cleaning 9, \$95,00 10. Personal care products and services 10. \$45,00 11. Medical and dental expenses 11. \$26,00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$400,00 Do not include car payments 13. \$0,00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0,00 14. Charitable contributions and religious donations 14. \$0,00 15. Insurance. 15a \$0,00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15a \$15a \$0,00 15c. Vehicle insurance 15b \$0,00 \$0.00 | 7. Food and housekeeping supplies | | 7. | \$400.00 |
| 10. Personal care products and services 11. Medical and dental expenses 11. S26.00 11. Medical and dental expenses 11. S26.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. Mealth insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Vehicle taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance. 15c. Vehicle taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Vehicle taxes deducted from your pay or included in lines 4 or 20. Specify: 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17c. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18e. So.00 18. Your payments for vehicle 1, Your income (Official Form 1061). 19. Other payments you make to support others who do not live with you. Specify: 19. So.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Maintenance, repair, and upkeep expenses. 20d. So.00 20d. Maintenance, repair, and upkeep expenses. | 8. Childcare and children's education costs | | 8. | \$0.00 |
| 11. Medical and dental expenses 11. \$26.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$400.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance. Specify: 15c. \$140.00 15c. Vehicle insurance. Specify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17c. Installment or lease payments: 17a \$0.00< | 9. Clothing, laundry, and dry cleaning | | 9. | \$95.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$400.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. | 10. Personal care products and services | | 10. | \$45.00 |
| Do not include car payments 13. 13. 13. 13. 13. 13. 13. 14. | 11. Medical and dental expenses | | 11. | \$26.00 |
| 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 30.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$0.00 15b. Lefaith insurance 15b. \$0.00 < | | train fare. | 12. | \$400.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. S0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. S140.00 15d. Other insurance. Specify: 15d. S0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. S0.00 17d. Other. Specify: 17d. S0.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. Your payments you make to support others who do not live with you. Specify: 20a. Mortgages on other property 20a. Mortgages on other property 20a. S0.00 20b. Real estate taxes. 20b. S0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. | 13. Entertainment, clubs, recreation, newspapers, r | nagazines, and books | 13. | \$0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$140.00 15c. Vehicle insurance 15c \$140.00 15d. Other insurance. Specify: 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 14. Charitable contributions and religious donations | s | 14. | \$0.00 |
| 15b | | included in lines 4 or 20. | | |
| 15c. Vehicle insurance | 15a. Life insurance | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | 15b | \$0.00 |
| Specify: | | | 15c | \$140.00 |
| Specify: | 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. | 16. Taxes. Do not include taxes deducted from your pa | y or included in lines 4 or 20. | | |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | Specify: | | 16 | \$0.00 |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | 17. Installment or lease payments: | | 10 | |
| 17c. Other. Specify: | 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17d. Other. Specify: | 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17d. Other. Specify: | 17c. Other. Specify: | | 17c | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | \$0.00 |
| Specify: | | • | 18. | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | o do not live with you. | 10 | \$0.00 |
| 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | es 4 or 5 of this form or on Schedule I: Your Income | 19. | \$0.00 |
| 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | , , , , | 55 . 5. 5 5. All 5 form of on concease it four income. | 20a | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | |
| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 20c. Property, homeowner's, or renter's insurance | | | |
| | 20d. Maintenance, repair, and upkeep expenses. | | | |
| | 20e. Homeowner's association or condominium due | es | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 | | | Wright Bobo | Case number (if known) | | |
|-------------------|--------------------------|---------------------------------|-------------------------------|------------------------|-----|------------------|
| | First Name | Middle Name | Last Name | | | |
| 21. Othe i | - Specify: | | | | 21 | \$0.00 |
| 22. Calc | ulate your monthly ex | penses. | | | | #4.000.00 |
| | Add lines 4 through 21. | | | | | \$1,226.00 |
| | Copy line 22 (monthly e | | \$0.00 | | | |
| | | he result is your monthly exp | | | 22. | \$1,226.00 |
| | late your monthly net | | G.110001 | | 22. | |
| | | oined monthly income) from | Cohodulo I | | 0.0 | 4.050 |
| | | • | Scriedule I. | | 23a | \$1,676.85 |
| 23b. (| Copy your monthly expe | enses from line 22 above. | | | 23b | \$1,226.00 |
| | | xpenses from your monthly i | ncome. | | | \$450.85 |
| | The result is your month | nly net income. | | | 23c | |
| 24. Do y o | ou expect an increase | or decrease in your expen | ses within the year after ye | ou file this form? | | |
| Ford | yamala da yay ayaast | to finish paying for your car l | oon within the year or do you | Lovoot vour | | |
| | | se or decrease because of a r | | | | |
| | lo | | | | | |
| | | | | | | |
| | 'es | | | | | |
| | Explain here: | | | | | |
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| | | | | | | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Ricky | | Wright Bobo |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | |
|-----|--|---|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? | |
| | ✓ No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | | |
| | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | |
| 4.0 | · | | |
| X | /s/ Ricky Wright Bobo | * | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 9/26/2017 | Date | |
| | MM/DD/YYYY | MM/DD/YYYY | |

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| Fill in this info | ormation to identify your o | case: | | | | | |
|-------------------------------|--|--------------------------------|--|-------------------|----------|----------|----------------------------|
| Debtor 1 | Ricky | | Wright Bo | | | | |
| Debtor 2 | First Name | Middle N | ame Last Nam | е | | | |
| (Spouse, if filing) | First Name | Middle N | ame Last Nam | е | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | | | | |
| Case number | | | (State | =) | | | |
| (If known) | | | | | | | Check if this is |
| Official | Form 107 | | | | | | amended filing |
| Stateme | ent of Financia | al Affairs fo | or Individuals | Filina for | Bankrı | uptcv | 04 |
| information. number (if kr | If more space is need nown). Answer every o | ed, attach a sepa Juestion. | rried people are filing trate sheet to this form | On the top of | | | |
| | s your current marital st | | and where You Lived | beiore | | | |
| | | atus | | | | | |
| | arried ot married | | | | | | |
| | | | other than where you liv | | | | |
| | | ou lived in the last | 3 years. Do not include v Dates Debtor 1 lived there | Vhere you live no | DW. | | Dates Debtor 2 lived there |
| | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| 33 | 01 S Giles Ave | | | _ | | | _ |
| | imber Street | | From <u>03/2001</u> | Number Stree | t | | From |
| | | | To <u>03/2015</u> | | | | То |
| Ch Cit | nicago Illinois ty State | 60616 Zip Code | | City | State | Zip Code | |
| | • | · | | Same as | Debtor 1 | · | Same as Debtor 1 |
| Nu | ımber Street | | From | Number Stree | t | | From |
| Cit | ty State | Zip Code | | City | State | Zip Code | |
| and territo | <i>ories</i> include Arizona, Calif | ornia, Idaho, Louisia | ouse or legal equivalent ana, Nevada, New Mexico, Codebtors (Official Form | Puerto Rico, Tex | | - ' | Community property states |

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Wright Bobo Debtor 1 Ricky Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$15000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$5000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$8000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: Link \$450.00 For last calendar year: (January 1 to December 31, 2016 link \$1,500.00 For the calendar year before that: (January 1 to December 31, 2015

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Debtor 1 Ricky Wright Bobo __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| Dates of payments to an insider. Dates of payment Total amount paid Still owe Reason for this payment Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. Dates of payment Total amount paid Amount you still owe Reason for this payment Insider's Name Number Street City State Zip Code Dates of payment Total amount paid Amount you still owe Reason for this payment Include creditor's name Number Street City State Zip Code Insider's Name Number Street | or 1 | Ricky | | | W | right Bobo | Case number | (if known) |
|--|-------------------|---|--|--|--|--|--|---|
| insiders include your relatives, any general partners, relatives of any general partners, partnerships of which you are an officer, director, person in control, or owner of 20% or more of their owners owners owners owners of their owners owner | | First Name | | Middle Name | La | st Name | | |
| Ves. List all payments to an insider. Dates of payment Dates of Dates of Dates of payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of Date | nsi com age | ders include your porations of whic nt, including one | relatives; and the relatives; are relatives; and the relatives; and the relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; are relatives; are relatives; and the relatives; are relatives; and the relatives; are relatives; are relatives; and the relatives; are | any general partners an officer, director, ness you operate as | s; relatives of any person in control | general partners; part or owner of 20% or | tnerships of which y more of their voting | ou are a general partner; g securities; and any managing |
| Dates of payment Total amount Amount you Still owe Reason for this payment | ✓ | No | | | | | | |
| Insider's Name Number Streat City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Insider's Name Number Street City State Zip Code City State Zip Code Insider's Name Number Street Number Street | | Yes. List all pay | ments to | an insider. | | | | |
| Number Street City State Zip Code | | | | | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ☐ Yes. List all payments that benefited an insider. ☐ Dates of payment ☐ Dates of payment ☐ paid ☐ Total amount you still owe ☐ Insider's Name ☐ Number Street ☐ City State Zip Code ☐ Insider's Name ☐ Number Street ☐ Number S | | Number Street | | | | | | |
| Number Street City State Zip Code | _ | City | State | Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name Number Street | | Number Street | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No | | City | State | Zin Code | | | | |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street | | ude payments on No | | _ | ider. Dates of | | - | |
| Number Street City State Zip Code Insider's Name Number Street | | Incidor's Namo | | | | | | include creditor's frame |
| City State Zip Code Insider's Name Number Street | | | | | | | | |
| Insider's Name Number Street | | Number Street | | | | | | |
| Number Street | _ | City | State | Zip Code | | | | |
| | | Insider's Name | | | _ | | | |
| | | Number Street | | | | | | |
| City State Zin Code | | City | State | Zip Code | | | | |

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Debtor 1 Ricky Wright Bobo Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2011 Nissan Altima 9/2017 \$3300 City of Chicago - Parking and red Light Tickets Creditor's Name Explain what happened Department of Revenue - PO Box 88292 Number Street Property was repossessed. Property was foreclosed. Chicago Illinois 60680 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property 2011 Nissan Altima \$3300 9/2017 TTL FIN AC Creditor's Name Explain what happened 4530 S Archer Ave Number Street Property was repossessed. Property was foreclosed. Chicago Illinois 60632 Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | | Ricky First Name | Middle Name | Wright Bobo Last Name | Case number (if known) | | |
|------|----------|-------------------------|---|---------------------------------------|---------------------------------|--------------------------|---|
| 11. | | | | | ank or financial institution, s | et off anv amou | nts from vour |
| | | | ake a payment because you | | , | , | ····· , · · · · · · · · · · · · · · · · |
| | ✓ | No | | | | | |
| | | Yes. Fill in the detail | S. | | | | |
| | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | | | | |
| | | | | Last 4 digits of account n | umber: XXXX- | | |
| | | 0:1 | 7'- 0-4 | | | | |
| | | City S | tate Zip Code | | | | |
| 12. | | | filed for bankruptcy, was ar stodian, or another official? | | oossession of an assignee for | the benefit of o | reditors, a court- |
| | ✓ | No | | | | | |
| | | Yes | | | | | |
| Part | 5: | List Certain Gifts | and Contributions | | | | |
| 13. | Wi | thin 2 years before v | ou filed for bankruptcy, did v | you give any gifts with a to | tal value of more than \$600 | per person? | |
| | | | | , , , , , , , , , , , , , , , , , , , | | | |
| | ¥ | Yes. Fill in the detai | ils for each gift. | | | | |
| | | | llue of more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | giits | |
| | | Person to Whom You | Gave the Gift | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City S | tate Zip Code | | | | |
| | | Person's relationship | to you | | | | |
| | | | _ | | | | |
| | | Person to Whom You | ı Gave the Gift | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City S | tate Zip Code | | | | |
| | | Person's relationship | to you | | | | |

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| Debto | or 1 | Ricky | Wright Bobo | Case number (if know | n) | |
|--------|----------|--|---|--------------------------------|---|---------------------------------------|
| | | First Name Middle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you filed for bankruptcy, | did you give any gifts or contribu | utions with a total value | of more than \$600 | to anv charity? |
| | V | No | , , , , , | | | |
| | H | Yes. Fill in the details for each gift or contrib | oution. | | | |
| | ш | Gifts or contributions to charities | Describe what you contr | ihuted | Date you | Value |
| | | that total more than \$600 | bescribe what you conti | ibuteu | contributed | Value |
| | | | | | | |
| | | Charity's Name | | | | |
| | | | | | | |
| | | N. ark are Olivert | | | | |
| | | Number Street | | | | |
| | | City State Zip Code | | | | |
| | | List Contain Lassa | | | 4 | |
| Part (| 6: | List Certain Losses | | | | |
| 15. | Wit | hin 1 year before you filed for bankruptcy or | r since you filed for bankruptcy, | did you lose anything bed | ause of theft, fire, | other disaster, or |
| | | nbling? | , | , , , | | • |
| | ~ | No | | | | |
| | Ħ | Yes. Fill in the details. | | | | |
| , | | Describe the property you lost and | Describe any insurance | coverage for the loss | Date of your | Value of property |
| | | how the loss occurred | Include the amount that in | | loss | lost |
| | | | pending insurance claims A/B: Property. | on line 33 of <i>Scriedule</i> | | |
| | | | | | | |
| | | List Certain Payments or Transfers | | | | |
| | | ut seeking bankruptcy or preparing a banking a banking and attorneys, bankruptcy petition preparers No Yes. Fill in the details. | | services required in your b | ankruptcy. | |
| | | | Description and value of transferred | any property | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | Attorney's Fee - 400.00 | | 9/25/2017 | \$400.00 |
| | | Person Who Was Paid | | | | · · · · · · · · · · · · · · · · · · · |
| | | 20 S. Clark Street Number Street | | | | |
| | | 28th Floor | | | | |
| | | | | | | |
| | | Chicago Illinois 60603 City State Zip Code | | | | |
| | | | | | | |
| | | Email or website address | | | | |
| | | Person Who Made the Payment, if Not You | | | | |
| | | | | | | |
| | | Person Who Was Paid | | | | |
| | | Number Street | | | | |
| | | | | | | |
| | | | | | | |
| | | City State Zip Code | | | | |
| | | Email or website address | | | | |
| | | Email of Website address | | | | |
| | | Person Who Made the Payment if Not You | | | | |

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| Debt | | Ricky | | Wright Bobo | Case number (if | fknown) | |
|------|----------|--|-----------------------|--|----------------------|---|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | nin 1 year before you filed you deal with your cred not include any payment or | itors or to make paym | | ır behalf pay or tra | ansfer any property to a | nyone who promised to |
| | ✓ | No | | | | | |
| | Ш | Yes. Fill in the details. | | | | | |
| | | | | Description and value of any transferred | / property | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | No Yes. Fill in the details. | | Description and value of pro | | be any property or nts received or debts p | Date aid transfer was |
| | | | | transierreu | in exch | | made |
| | | Person Who Received Tra | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code ou | | | | |
| | | Person Who Received Tra | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to yo | ou | | | | |
| 19. | ben | nin 10 years before you fi eficiary? ese are often called asset-pr | | d you transfer any property to a | self-settled trust o | or similar device of whic | ch you are a |
| | | No Yes. Fill in the details. | | | | | |
| | _ | | | Description and value of th | ne property transfe | erred | Date transfer was made |
| | | Name of trust | | | | | |

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Debtor 1 Ricky Wright Bobo _ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City

City

State

Zip Code

State

Zip Code

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| Deb | tor 1 | Ricky First Name | | Middle Name | | ht Bobo Name | C | ase number (| if known) | |
|------|----------|----------------------|-----------------|-------------------|-----------------|-----------------|------------------|----------------|---|------------------|
| | | riist ivaille | IV. | illudie ivallie | Last | Ivame | | | | |
| 26. | Hav | e you been a part | y in any judici | al or administra | ative procee | ding under | r any environm | ental law? Ir | nclude settlements and o | orders. |
| | | No | | | | | | | | |
| | Ħ | Yes. Fill in the det | tails. | | | | | | | |
| | | | | | Court or age | ncy | | Nature | of the case | Status of the |
| | | | | | | | | | | case |
| | | Case title | | | | | | | | Pending |
| | | | | | Court Name | | | _ | | |
| | | Case number | | i | NumberStreet | | | _ | | On appeal |
| | | Case Humber | | | | | | | | Concluded |
| | | | | Ō | City | State | Zip Code | | | |
| Pari | 111- | Give Details Al | oout Your Bu | ısiness or Co | nnections t | to Any Bu | ısiness | | | |
| | | Cito Dotailo, L | | .0000 0. 00 | | .07.11.9 20 | .0.1.000 | | | |
| 27. | Witl | nin 4 years before | you filed for b | ankruptcy, did | you own a b | usiness or | have any of th | ne following o | connections to any busin | ess? |
| | | ☐ A sole propri | etor or self-em | nployed in a tra | de professio | on or othe | r activity eithe | r full-time or | nart-time | |
| | | | | | | | • | | pai t-uirie | |
| | | | | lity company (L | LC) or inflited | і наршіў ра | artriership (LLF | -) | | |
| | | | a partnership | | | | | | | |
| | | | | aging executiv | - | | | | | |
| | | An owner of | at least 5% of | the voting or e | quity securitie | es of a cor | poration | | | |
| | V | No. None of the a | above applies. | Go to Part 12. | | | | | | |
| | П | Yes. Check all tha | at apply above | e and fill in the | details below | for each l | business. | | | |
| | | | | | | | ure of the busi | ness | Employer Identification | on number Do not |
| | | | | | | | | | include Social Securit | |
| | | Business Name | | | _ | | | | EIN: | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | _ | | | | Dates business existe | d |
| | | | | | Name o | of account | ant or bookke | eper | | |
| | | City | State | Zip Code | | | | | From To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Describ | e the nat | ure of the busi | ness | Employer Identification | on number Do not |
| | | | | | | | | | include Social Securit | |
| | | Decision N | | | _ | | | | EIN: | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | _ | | | | Dates business existe | d |
| | | | | | Name o | of account | ant or bookke | eper | | |
| | | City | State | Zip Code | _ | | | | From To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | B | | | | English the recent | |
| | | | | | Descrit | be the nat | ure of the busi | ness | Employer Identification include Social Security | |
| | | | | | | | | | EIN: | • |
| | | Business Name | | | _ | | | | LIIV. | |
| | | Number Street | | | _ | | | | Dates business existe | d |
| | | Number Street | | | Name o | of account | ant or bookke | eper | Dates Dusilless existe | u . |
| | | City | State | Zip Code | _ | | | • | From To | |
| | | • | | | | | | | . 10111 | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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| Deb | otor 1 Ricky | Wright Bobo | Case number (if known) |
|------|--|------------------------------------|--|
| | First Name Middle Name | Last Name | |
| 28. | Within 2 years before you filed for bankruptcy, d creditors, or other parties. | id you give a financial stateme | ent to anyone about your business? Include all financial institutions, |
| | ✓ No ☐ Yes. Fill in the details below. | | |
| | | Date issued | |
| | | | |
| | Name | MM/DD/YYYY | |
| | Number Street | | |
| | City State Zip Code | | |
| | Only State 2.p Sout | | |
| Part | t 12: Sign Below | | |
| 1 | true and correct. I understand that making a false | e statement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Debtor 1 | | Signature of Debtor 2 |
| | 3 | | Date |
| | Date 9/26/2017 | | bute |
| ı | Did you attach additional pages to Your Statemer | nt of Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| | No No | | |
| i | Yes | | |
| ı | Did you pay or agree to pay someone who is not a | n attorney to help you fill out | bankruptcy forms? |
| | ✓ No | | |
| | Yes. Name of person | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Nort | hern District of Illino | ois | |
|-------|--|-------------------|-----------------------------|------------------------|----------------------------------|
| In re | Ricky Wright Bobo | | | Case No. | |
| | Debtor | | | | (If known) |
| | | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPE | NSATION OF A | ATTORNEY F | OR DEBTOR |
| CO | ursuant to 11 U.S.C. § 329(a) and F ompensation paid to me within one ndered or to be rendered on behalf | year before the | filing of the petition in b | ankruptcy, or agreed t | to be paid to me, for services |
| Fo | or legal services, I have agreed to ac | cept | | | \$4,000.00 |
| Pr | ior to the filing of this statement I h | nave received | | | \$400.00 |
| Ba | alance Due | | | | \$3,600.00 |
| 2. Th | ne source of the compensation paid | I to me was: | | | |
| | Debtor | | ther (specify) | | |
| 3. Th | ne source of the compensation paid | I to me is: | | | |
| | ✓ Debtor | | ther (specify) | | |
| 4. | I have not agreed to share the abomembers and associates of my la | | compensation with any o | ther person unless the | ey are |
| | I have agreed to share the above- members or associates of my law the people sharing in the comper | firm. A copy o | f the agreement, togethe | | |
| 5. In | return for the above-disclosed fee, | I have agreed t | o render legal service for | all aspects of the ban | kruptcy case, including: |
| | a. Analysis of the debtor's finance bankruptcy; | cial situation, a | and rendering advice to th | e debtor in determinir | ng whether to file a petition in |
| | b. Preparation and filing of any p | oetition, sched | ules, statements of affairs | and plan which may | be required; |
| | c. Representation of the debtor | at the meeting | of creditors and confirma | tion hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary pr | oceedings and other con | tested bankruptcy ma | tters; |
| 6. By | agreement with the debtor(s), the | above-disclose | ed fee does not include th | e following services: | |
| | | | | | |
| | | | | | |
| | | | CERTIFICATION | | |
| | tify that the foregoing is a completes) in this bankruptcy proceedings. | e statement of | any agreement or arrange | ement for payment to | me for representation of the |
| | 9/26/2017 | | /s/ | Elizabeth Placek | |
| | Date | | Siç | gnature of Attorney | |
| | | | 5 | Semrad Law Firm | |
| | | | | Name of law firm | |

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| n re | Ricky Wright | | Case No. | | | | | |
|-----------|---|--|---|-------------------------------|--|--|--|--|
| _ | Debtor | - MAIL-276-000-0-1 | 400 000 e10 e10 e10 e10 e10 e10 e10 e10 e | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF (| COMPENSATION | OF ATTORNEY F | OR DEBTOR | | | | |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one yrendered or to be rendered on behalf of | year before the filing of the petit | ion in bankruptcy, or agreed to | be paid to me, for services | | | | |
| | For legal services, I have agreed to acc | \$4,000.00 | | | | | | |
| | Prior to the filing of this statement I have | ave received | | \$400.00 | | | | |
| | Balance Due | | | \$3,600.00 | | | | |
| 2 | . The source of the compensation paid | to me was: | • | • | | | | |
| | Debtor | Other (specify) | | | | | | |
| 3 | . The source of the compensation paid | to me is: | | | | | | |
| | [Debtor | Other (specify) | | | | | | |
| 4 | . I have not agreed to share the abomembers and associates of my la | ove-disclosed compensation wit w firm. | h any other person unless they | / are | | | | |
| | I have agreed to share the above- members or associates of my law the people sharing in the compen | firm. A copy of the agreement, t | other person or persons who a ogether with a list of the name | re not s of | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | | |
| | a. Analysis of the debtor's finance bankruptcy; | cial situation, and rendering advi | ce to the debtor in determining | whether to file a petition in | | | | |
| | b. Preparation and filing of any p | etition, schedules, statements o | f affairs and plan which may be | e required; | | | | |
| | c. Representation of the debtor a | at the meeting of creditors and co | onfirmation hearing, and any a | djourned hearings thereof; | | | | |
| | d. Representation of the debtor in | n adversary proceedings and oth | ner contested bankruptcy matte | ers; | | | | |
| 6. | . By agreement with the debtor(s), the a | above-disclosed fee does not inc | lude the following services: | | | | | |
| | | | | | | | | |
| | • | CERTIFICATIO | N . | | | | | |
| l debt | certify that the foregoing is a complete tor(s) in this bankruptcy proceedings. | estatement of any agreement or | arrangement for payment to m | e for representation of the | | | | |
| | 9/25/2017 | /s/ Elizabeth Placek | | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | _ | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

RWB-

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement; setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$61.76 for expenses, leaving a balance due of \$3,971.76

Date:

9/25/2017

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Signed: /s/ Ricky Wright Runnyfully ABO | Marie Contraction of the Contrac | |
|--|--|--|
| | /s/ Elizabeth Placek | |
| Debtor(s) | Attorney for Debtor(s) | |
| Do not sign if the fee amounts at top of thi | s page are blank. | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$61.76 for expenses, leaving a balance due of \$3,971.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 9/26/2017 | |
|-----------|---------------|------------------------|
| Signed: | | |
| /s/ Ricky | / Wright Bobo | |
| | | /s/ Elizabeth Placek |
| Debtor(s | s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Wright Bobo, Ricky Debtor(s) | Case No | |
|-----------------|--|---|--------------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFIC | ATION OF CREDITOR MAT | TRIX |
| TI knowledge | he above named Debtors hereby verify e. | that the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 9/26/2017 | /s/ Wright Bobo, Wright Bobo, Ri Signature of Deb | cky |

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TTL FIN AC 4530 S Archer Ave Chicago, IL, 60632

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

IL Tollway PO Box 5544 Chicago, IL, 60608

FIFTH THIRD PO Box 630784 Cincinnati, OH, 45263

Mercy Hospital 2525 S. Michigan Avenue Chicago, IL, 60616

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| Debtor 1 Ricky First Name | Wright | | umber (// known) |
|---|---|--|---|
| | Middle Name Last Name estions for Reporting Purposes | ne | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily cons "incurred by an individual prima No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily busin | arily for a personal, family ness debts? <i>Business de</i> ment or through the oper | ebts are debts that you incurred to obtain ration of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds v | you estimate that after any | exempt property is excluded and administrative to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | 1-49 50-99 100-199 200-999 | 1,000-5,000 5,001~10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| ^{19.} How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500 | \$1,000,000,001-\$10 billion sillion \$1,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? Part 76. Sign Below | | \$1,000,001-\$10 mill \$10,000,001-\$50 mill \$50,000,001-\$100 r \$100,000,001-\$500 | illion |
| 22148 Sign below | | NOTES COMPANIES CONTROL CONTRO | |
| | correct. If I have chosen to file under Chapter of title 11, United States Code. I under under Chapter 7. If no attorney represents me and I did out this document, I have obtained ar I request relief in accordance with the I understand making a false statemen connection with a bankruptcy case caboth. 18 U.S.C. §§ 152, 1341, 1519, | 7, I am aware that I may perstand the relief available inot pay or agree to pay so defeat the notice require chapter of title 11, Unite at, concealing property, or an result in fines up to \$2 and 3571. | ed States Code, specified in this petition. r obtaining money or property by fraud in 250,000, or imprisonment for up to 20 years, or |
| | Signature of Debtor 1 | C . | Signature of Debtor 2 |
| | Executed on 9/25/2017 MM / DD / YYYY | | Executed on |

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| Fill in this info | rmation to identify your ca | Se) | | | |
|---------------------------------|--|--|--|---|---|
| Debtor 1 | Ricky | | Wright | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spause, if filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | ACCOUNTS OF THE SECOND | |
| Case number (If known) | And the second s | MACONINS AND | (State) | annumentum . | |
| Official | Form 106De | 2 | A Security S | | Check if this is a amended filing |
| Declarat | tion About an I | ndividual Deb | tor's Schedule | S | 12/1 |
| If two married | people are filing togethe | r, both are equally respo | nsible for supplying corre | ect information. | |
| money or prop U.S.C. §§ 152, | erty by fraud in connection 1341, 1519, and 3571. | on with a bankruptcy cas | e can result in fines up t | Making a false statement, concealing p o \$250,000, or imprisonment for up to 2 | 20 years, or both. 18 |
| Part it. Sign | า Below | MENDE CONTRACTOR PROTECTION CONTRACTOR CONTR | | | CONTRACTOR |
| Did you p | eay or agree to pay some | one who is NOT an attorr | ey to help you fill out bar | nkruptcy forms? | |
| [] No | | | | | |
| Laurel | Name of person | | Attach Bankruptcy Signature (Official | Petition Preparer's Notice, Declaration, and Form 119). | Í |
| | | that I have read the sun | nmary and schedules filed | d with this declaration and | |
| that they | are true and correct. | . 1 - | | | |
| | | NBER | * | | |
| Signature (| of Debtor 1 | | Signatu | re of Debtor 2 | |

MM/DD/YYYY

Date 9/25/2017 MM/DD/YYYY

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| Debtor 1 | | | | Wright | Case num | ber (it known) |
|------------------|---------------------|---|---------------------|---------------------------|-----------------------|--|
| | First Name | | Middle Name | Last Name | | |
| | | before you filed for l ther parties. | bankruptcy, did yo | ou give a financial state | ment to anyone ab | out your business? Include all financial institutions |
| [7] | No | | | | | |
| Samuel Samuel | | the details below. | | | | |
| Land | 100.11.11 | the astano polovi. | | Data issued | | |
| | | | | Date issued | | |
| | Name | | | MM/DD/YYYY | | |
| | | | | | | |
| | Number | Street | | | | |
| | | | | _ | | |
| | City | State | Zip Code | | | |
| Part 12: | Sign Bel | ow | | | | |
| 14 | | | | | | |
| true | and correct | . I understand that r | naking a false sta | tement, concealing pro | perty, or obtaining | re under penalty of perjury that the answers are money or property by fraud in connection with |
| a bar | nkruptcy ca | se can result in fine | s up to \$250,000, | or imprisonment for up | to 20 years, or bot | ı. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | • | | -77° | | | • |
| | × | /s/ Ricky Wright | X trakefile | Bulg | × | |
| | | Signature of Debtor 1 | | | Signature o | of Debtor 2 |
| | | Date 9/25/2017 | | | Date | |
| | | Date 9723/2017 | | | | |
| Did y | ou attach a | dditional pages to Y | our Statement of | Financial Affairs for Inc | ividuals Filing for E | ankruptcy (Official Form 107)? |
| | | | | | | |
| | No | | | | | |
| Susania. | | | | | | |
| Susania. | No Yes | | | | | |
| Emme Emme | Yes | gree to pay someone | e who is not an att | torney to help you fill o | at bankruptcy form | 5? |
| Did y | Yes | gree to pay someone | e who is not an att | torney to help you fill o | ut bankruptcy form: | s? |
| Did y | Yes /ou pay or a | | e who is not an att | torney to help you fill o | | s? e Bankruptcy Petition Preparer's Notice, |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| mre: | Debtor(s) | Case No | *************************************** |
|-----------------|--|---|---|
| | | Chapter. | Chapter13 |
| | VERI | ICATION OF CREDITOR MA | TRIX |
| Ti knowledge | ne above named Debtors hereby vi e. | rify that the attached list of creditors is | true and correct to the best of their |
| Date: | 9/25/2017 | | o, Ricky & Ricky Why & J-Belle |
| | | Wright Bobo, F Signature of D | |

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| Debt | or 1 Ricky First Name | Middle Name | Wright Last Name | Case number (d known) | |
|--------|--|---|--|--|-------------|
| 16. | Calculate the median | family income that applies to y | ou. Follow these st | 9DS: | |
| | 16a. Fill in the state in v | | Illinois | | |
| | 16b. Fill in the number | of people in your household. | 1 | - - | |
| 17. | household | | To I | ind a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office. | \$50,765.00 |
| | 17a. Line 15b is les under 11 U.S. | ss than or equal to line 16c. On th .C. § 1325(b)(3). Go to Part 3 , Do | e top of page 1 of the NOT fill out <i>Calcul</i> | nis form, check box 1, <i>Disposable income is not determined lation of Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1323 | ore than line 16c. On the top of pa 5(b)(3). Go to Part 3 and fill out (ur current monthly income from li | Calculation of Disp | theck box 2, Disposable income is determined under 11 posable Income (Official Form 122C-2). On line 39 of that | · |
| Part | 8. Calculate Your (| Commitment Period Under | 11 U.S.C. §1325 | (b)(4) | |
| 18. | Copy your total average | ge monthly income from line 11. | | | \$1,676.86 |
| 19. | Deduct the marital ad commitment period und | justment if it applies. If you are i | narried, your spous | e is not filing with you, and you contend that calculating the of your spouse's income, copy the amount from line 13. | |
| | | iment does not apply, fill in 0 on ii | | , your operation of mountain, copy are amount from the 10. | -\$0.00 |
| | 19b. Subtract line 19a | from line 18. | | • | \$1,676,86 |
| 20. | Calculate your current | t monthly income for the year. F | follow these steps: | | |
| | 20a, Copy line 19b. | | | | \$1,676.86 |
| | Multiply by 12 (the | number of months in a year). | | | x 12 |
| | 20b. The result is your o | current monthly income for the year | r for this part of the | form, | \$20,122.32 |
| | 20c. Copy the median f | amily income for your state and siz | ce of household from | m line 16c. | \$50,765.00 |
| 21. | How do the lines comp | pare? | | | |
| | Line 20b is less that commitment period | n line 20c. Unless otherwise order is 3 years. Go to Part 4. | ed by the court, on | the top of page 1 of this form, check box 3, The | |
| | Line 20b is more th 4, The commitment | an or equal to line 20c. Unless oth t period is 5 years. Go to Part 4. | erwise ordered by th | ne court, on the top of page 1 of this form, check box | |
| lajile | Sign Below | | | | |
| | By signing here, I do | eclare under penalty of perjury that | the information on | this statement and in any attachments is true and correct. | |
| | /s/ Ricky Wri | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | and the second s | Signature of Debtor 2 | |
| | Date 9/25/201 MM/DD/ | | | Date MM/DD/YYYY | : |
| | If you checked 17a, If you checked 17b, above. | do NOT fill out or file Form 122C- fill out Form 122C-2 and file it wit | 2. h this form. On line | 39 of that form, copy your current monthly income from line | 14 |